

ISSUE SLIP SAMPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			13/10
FORMALITY REVIEW	TB	Je 1108	09.13.01
RESPONSE FORMALITY REVIEW	Tz	947	11/15/01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

APPLIC/ 09/

TITLE APPLICANTS
 N
 R
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Claim	Date
Final	
Original	
1	9/12/01
2	10/01/01
3	10/01/01
4	10/01/01
5	10/01/01
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Claim	Date
Final	
Original	
51	10/01/01
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99	10/01/01
100	10/01/01

Claim	Date
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